

PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Jayaraman, et al.

Group Art Unit: 3739

Serial No.: 09/713,161

Examiner: Lee S. Cohen

Filed: November 14, 2000

Docket No. 820701-1121
(GTRC 25CIP1)

For: **A Novel Fabric-Based Sensor For Monitoring Vital Signs**

AMENDMENT AND RESPONSE TO OFFICE ACTION

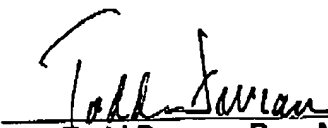
BOX: AF
Commissioner for Patents
P. O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

The Office Action mailed *January 15, 2004* (Paper No. 18) has been carefully considered. In response thereto, please enter the following amendments and consider the following remarks.

AUTHORIZATION TO DEBIT ACCOUNT

A Petition for Extension of time for two months is enclosed with this Response. It is not believed that any additional extensions of time or fees are required, beyond those which may otherwise be provided for in documents accompanying this paper. However, in the event that additional extensions of time are necessary to allow consideration of this paper, such extensions are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to deposit account no. 20-0778.

AMENDMENT TRANSMITTAL LETTER (SMALL)				Docket No. 820701-1121	
Applicant(s):					
Serial No. 09/713,161	Filing Date November 14, 2000	Examiner Lee S. Cohen	Confirmation No. 3391	Group Art Unit 3739	
Invention: A Novel Fabric-Based Sensor For Monitoring Vital Signs					
Commissioner for Patents Mail Stop AF P.O. Box 1450 Alexandria VA 22313-1450					
Transmitted herewith is and Amendment and Response to Office Action in the above-identified application.					
The fee has been calculated and is transmitted as shown below					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	33 =	0	X \$9.00	\$0
INDEP. CLAIMS	3 -	3 =	0	X \$43.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$145.00	\$
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> 55.00	2 ND MONTH <input checked="" type="checkbox"/> 210.00	3 RD MONTH <input type="checkbox"/> 475.00	4 TH MONTH <input type="checkbox"/> 740.00	\$210.00
Other Fees:					\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$210.00
<input type="checkbox"/> No additional fee is required. <input checked="" type="checkbox"/> Please charge Deposit Account No. 20-0778 in the amount of 210.00. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed. <input type="checkbox"/> A Credit Card Payment Form PTO-2038 is attached in the amount of \$_____ <input checked="" type="checkbox"/> The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.					
 Todd Deveau, Reg. No. 29,526			15 June 2004 Date		